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26918 7590 05/09/2005

WHITE & FUDALA
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05/24/2005 HDEHSS2 00000085 10709545

Mark P. White (Depositor's name)
Mark P White (Signature)
05/23/2005 (Date)

01 FC:2501 700.00 0P

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
107709,545	05/12/2004	Garrin Samii	AMS-004	3544

TITLE OF INVENTION: (SHUTDOWN SEPARATORS WITH IMPROVED PROPERTIES)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	08/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DOVE, TRACY MAE	1745	429-251000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Mark P. White
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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☒ Issue Fee
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☐ A check in the amount of the fee(s) is enclosed.
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Authorized Signature Mark P White Date May 23, 2005
Typed or printed name Mark P White Registration No. 37,757

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PTO/SB/87 (08-03)

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on May 23, 2005
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Linda G. Johnson

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2. PTOL-85 Fee Transmittal Form

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**Law Offices Of White & Fudala****57 Bedford St.****Suite 103****Lexington, MA 02420****(781) 863-2041****FAX (781) 863-2250****Attorney Muriel Fudala****Attorney Mark P. White****FAX TRANSMISSION COVER SHEET****Date: May 23, 2005****FAX NUMBER: 703-746-4000****To: Box Issue Fee
via Facsimile transmission****Company: U. S. P.T.O.****From: Linda Johnson****pages incl. cover: 4****RE: Payment of Issue Fee****Utility Patent Appl. Serial # 10/709,545, Atty. Docket # AMS-004****Enclosed for filing please find:**

- 1. Payment of Issue Fee of \$700.00 (by credit card)**
- 2. Fee Transmittal form**
- 3. Certificate of Facsimile transmission**

Thank you for your attention to this request.

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